

09/875,059

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | M P      |        | 6-11-01 |
| O.I.P.E. CLASSIFIER       |          |        | 6-19-01 |
| FORMALITY REVIEW          | EW       | 949    | 8/8/01  |
| RESPONSE FORMALITY REVIEW |          |        |         |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
- ..... Allowed      I ..... Interference  
+ (Through numeral)..... Canceled      A ..... Appeal  
..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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08/02